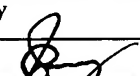


FEE TRANSMITTAL for FY 2005		Complete if Known	
<p>Patent fees are subject to annual revision. Effective December 8, 2004</p> <p>Stamp: OFFICE OF THE PATENT AND TRADEMARK OFFICE JUN 22 2005</p>		Application Number	10/603,279
		Confirmation Number	4437
		Filing Date	June 25, 2003
		First Named Inventor	Lee Michael Teras, et al.
		Examiner Name	Keith D. Henricks
		Art Unit	1761
TOTAL AMOUNT OF PAYMENT (\$620)		Attorney Docket No.	9286L

METHOD OF PAYMENT	FEE CALCULATION (continued)																														
<p>1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:</p> <p>Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company</p>	<p>5. <u>ADDITIONAL FEES</u></p> <table><thead><tr><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>Extension for reply within 1st month</td><td>(\$120) <input checked="" type="checkbox"/></td></tr><tr><td>Extension for reply within 2nd month</td><td>(\$450) <input type="checkbox"/></td></tr><tr><td>Extension for reply within 3rd month</td><td>(\$1,020) <input type="checkbox"/></td></tr><tr><td>Extension for reply within 4th month</td><td>(\$1,590) <input type="checkbox"/></td></tr><tr><td>Extension for reply within 5th month</td><td>(\$2,160) <input type="checkbox"/></td></tr><tr><td>Information Disclosure Statement fee</td><td>(\$180) <input type="checkbox"/></td></tr><tr><td>37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)</td><td>(\$130) <input type="checkbox"/></td></tr><tr><td>37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet</td><td>(\$50) <input type="checkbox"/></td></tr><tr><td>Non-English specification</td><td>(\$130) <input type="checkbox"/></td></tr><tr><td>Notice of Appeal</td><td>(\$500) <input checked="" type="checkbox"/></td></tr><tr><td>Filing a brief in support of an appeal</td><td>(\$500) <input type="checkbox"/></td></tr><tr><td>Request for oral hearing</td><td>(\$1,000) <input type="checkbox"/></td></tr><tr><td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td><td>(\$1,370) <input type="checkbox"/></td></tr><tr><td>Other:</td><td><input type="checkbox"/></td></tr></tbody></table>	Fee Description	Fee Paid	Extension for reply within 1 st month	(\$120) <input checked="" type="checkbox"/>	Extension for reply within 2 nd month	(\$450) <input type="checkbox"/>	Extension for reply within 3 rd month	(\$1,020) <input type="checkbox"/>	Extension for reply within 4 th month	(\$1,590) <input type="checkbox"/>	Extension for reply within 5 th month	(\$2,160) <input type="checkbox"/>	Information Disclosure Statement fee	(\$180) <input type="checkbox"/>	37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>	37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet	(\$50) <input type="checkbox"/>	Non-English specification	(\$130) <input type="checkbox"/>	Notice of Appeal	(\$500) <input checked="" type="checkbox"/>	Filing a brief in support of an appeal	(\$500) <input type="checkbox"/>	Request for oral hearing	(\$1,000) <input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370) <input type="checkbox"/>	Other:	<input type="checkbox"/>
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<p><u>FEE CALCULATION</u></p> <p>2. <u>BASIC FILING FEE - Large Entity</u></p> <table><thead><tr><th>Application Type</th><th>FILING FEE</th><th>SEARCH FEE</th><th>EXAMINATION FEE</th><th>Fee Paid</th></tr></thead><tbody><tr><td>Utility</td><td>(\$300)</td><td>(\$500)</td><td>(\$200)</td><td>(Total = \$1000) <input type="checkbox"/></td></tr><tr><td>Design</td><td>(\$200)</td><td>(\$100)</td><td>(\$130)</td><td>(Total = \$430) <input type="checkbox"/></td></tr><tr><td>Reissue</td><td>(\$300)</td><td>(\$500)</td><td>(\$600)</td><td>(Total = \$1400) <input type="checkbox"/></td></tr><tr><td>Provisional filing fee</td><td></td><td></td><td></td><td>(Total = \$200) <input type="checkbox"/></td></tr></tbody></table>	Application Type	FILING FEE	SEARCH FEE	EXAMINATION FEE	Fee Paid	Utility	(\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>	Design	(\$200)	(\$100)	(\$130)	(Total = \$430) <input type="checkbox"/>	Reissue	(\$300)	(\$500)	(\$600)	(Total = \$1400) <input type="checkbox"/>	Provisional filing fee				(Total = \$200) <input type="checkbox"/>						
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<p>3. <u>APPLICATION SIZE FEE:</u></p> <p>Sheets of Spec and Drawings <input type="checkbox"/></p> <p>(\$250 for each 50 sheets in excess of 100, except for sequence and program listings)</p> <p>SUBTOTAL (2)+(3) (\$)[0]</p>																															
<p>4. <u>EXTRA CLAIM FEES FOR UTILITY AND REISSUE:</u></p> <table><thead><tr><th></th><th>Extra Claims</th><th>Fee from Below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>Total Claims <input type="checkbox"/> - 20** = <input type="checkbox"/> x</td><td><input type="checkbox"/></td><td>=</td><td><input type="checkbox"/></td></tr><tr><td>Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x</td><td><input type="checkbox"/></td><td>=</td><td><input type="checkbox"/></td></tr><tr><td>Multiple Dependent claims:</td><td><input type="checkbox"/></td><td>=</td><td><input type="checkbox"/></td></tr></tbody></table> <p>** or number previously paid, if greater; For Reissues, see below</p> <p><u>Fee Description</u></p> <p>Claims in excess of 20 (\$50 per claim)</p> <p>Independent claims in excess of 3 (\$200 per claim)</p> <p>Multiple dependent claim, if not paid (\$360)</p> <p>**Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim)</p> <p>**Reissue claims: each claim over 20 and more than original patent (\$50 per claim)</p> <p>SUBTOTAL (4) (\$)[0]</p>		Extra Claims	Fee from Below	Fee Paid	Total Claims <input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/>	=	<input type="checkbox"/>	Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/>	=	<input type="checkbox"/>	Multiple Dependent claims:	<input type="checkbox"/>	=	<input type="checkbox"/>	<p>SUBTOTAL(5) (\$) [620]</p>														
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SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	S. Robert Chuey	Registration No. (Attorney/Agent)	39,140	Telephone	(513) 634-0102
Signature				Date	June 20, 2005

This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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